## 1/14000007158

(Re	equestor's Name)			
(Address)				
(Ac	ldress)			
(Ci	ty/State/Zip/Phon	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bı	usiness Entity Nai	me)		
(Document Number)				
Certified Copies	_ Certificate:	s of Status		
Special Instructions to Filing Officer:				

Office Use Only



300283255353

03/17/16--01004--019 \*\*25.00

PALCAHASSEF, FINISH.

K.SALY EXAMINER MAR 22

## **COVER LETTER**

TO:

TO:			Section Corporations		
SUBJE		3ioSt	ar Renewables LLC		
SOBOL			(Name of For	eign Limited Liability C	Company)
Dear Sir	r or Ma	ıdam:			
The enc	losed w	withdra	wal and fec(s) are submitted	d for filing.	
Please re	cturn al	ll corre	espondence concerning this	matter to the following:	
Mark	O'ffill				
			(Name of Person)		
BioSta	ar Re	newa	ables LLC		
			(Firm/Company)		
9400	Reed	ls Ro	ad, Suite 150		
			(Address)		
Overla	and P	Park,	KS 66207		
			(City/State and Zip Cod	le)	
For furtl	her info	ormatio	on concerning this matter, p	lease call:	
Mark	O'ffill			913	369-4104
		(Na	rme of Person)		Daytime Telephone Number)
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314			
Enclose	d is a c	check	for the following amount:		
<b>2</b> \$25 F	Filing F	Fee	□ \$30 Filing Fee & Certificate of Status	□ \$55 Filing Fee & Certified Copy	□ \$60 Filing Fee, Certificate of Status & Certified Copy



## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

BioStar Rene	wables, LLC
	(Name of limited liability company)
Kansas	
	(Jurisdiction of its organization)
03/11/16	
	(Date registered with Florida Department of State)
M140000071	58/
•	(Flor da Document Number)
	(Signature of authorized representative)
	Mark O'ffill
	(Typed or printed name of signee)

Filing Fee: \$25.00